SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Contractor N **美** 

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2016 Refund:

Amount Paid: 1

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED ō APPLICANT.

Bayfield Co. Zoning Dept

	×					blain)	Other: (explain)		
	×	_		,		Conditional Use: (explain)	Conditiona		
	×	(				e: (explain)	Special Use: (explain)		
	)	_			Iteration (specify)	Addition/A	Accessory		
913	188	12	NOT TOE HUMAN FIRE PARTON	Top to	GABIGE / NOT	<b>₽</b> 1	Accessory Building	À	Municipal Use
	×					Addition/Alteration (specify)	Addition//		
	- Indiana de la companya della companya della companya de la companya de la companya della compa		iood pi ap idamina)		e)	Wobile Home (manufactured date)	Mobile Ho	<b>]</b>	
And the state of t			food prep facilities)	r T cooking &	sleening quarters of	Rinkhouse w/(" capitary or " sleeping quarters or " cooking & food over facilities)	Bunkhous	}  -	
	× >					with Attached Car		D	Commercial IIIs
	××	عدم المح				with a Deck			
	× )		# ************************************			with (2 <sup>nd</sup> ) Porch			
	x )	_				with a Porch			Residential Use
	×					with Loft			
2	)			30/9/2	hack, etc.)	Residence (i.e. cabin, hunting shack, etc.)	Residence		
Footage	mensions × 23 1				Proposed Structure	tructure (first struct	Principal S	<b>*.</b> <	Proposed Use
	Height:		Width:		Length:	15 I ci crant to (t)	ini nalidda Site	on:	Proposed Construction:
4 44 47	Leight:				length:	k relevant to it)	sing annied for	f permit by	Fxisting Structure:
STANK OF THE STANK			None						
COEN-		let	☐ Compost Toilet			Foundation		Property	
	tract)	ervice conf	☐ Portable (w/service contract)	None		No Basement	Run a Business on	Run a Business on	
	y Type:	sts) Specif	1111	□ 3			on	Conversion	33,000,00
- Well	/ Type:	ry Specify Type:	☐ (New) Sanitary	□ 2	☐ Year Round	☐ 1-Story + Loft	☐ Addition/Alteration	Addition,	<u> </u>
□ City		1 1	☐ Municipal/City	1	Seasonal	□ 1-Story	struction	New Construction	
Water	e of /System perty?	What Type of Sewer/Sanitary System Is on the property?	Sewe Is o	# of bedrooms	Use	# of Stories and/or basement	ject	Project	Value at Time of Completion *include donated time & material
									Mon-Shoreland
□ Yes	⊒ Yes	line :	Distance Structure is from Shoreline:	Distance Stru	Pond or Flowage If yescontinue	□ Is Property/Land within 1000 feet of Lake, Pond or Flowage    No.	ty/Land within	ls Proper	Significant Control
Are Wetlands Present?	ls Property in Floodplain Zone?	<u> </u>	Distance Structure is from Shoreline:	Distance Stru	m (incl. Intermittent)	☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent)  Creek or Landward side of Floodplain?	ty/Land within indward side of	☐ Is Proper Creek or La	Ι
360	Acreage †7.	Paris 101		YON D	DRUMMOND	N, Range W	MM	, Township	section 19
		Subdivision:	Block(s) No.	Lot(s) No.	0	Lot(s)	Gov't Lot	1/4	NW 1/4, NE
1 94-95	Recorded Document: (i.e. Property Ownership)  Volume // Page(s) 94-95	Volume	02 000-	-07-19-1	digits) 8-2-44		Legal Description: (Use Tax Statement)	egal Descri	PROJECT LOCATION
Written Authorization Attached  O Yes O No	Written Au Attached □ Yes □	ate/Zip):	Agent Mailing Address (include City/State/Zip):	gent Wailing Ad			plication on behalf	on Signing App	Authorized Agent: (Person Signing Application on behalf of Owner(s))
ione:	Plumber Phone:				Contractor Phone: ငှို၊	Contr			Contractor:
808-774-1608	608-7		54832		•		S	る	BOS HOLL
608-754-1608	3546 608-75	WE 53	H.		HOS N. HARMONY	2016		LUBBE	ة أحم
HER	B.O.A. OTHER		ONAL USE SPECIAL USE City/State/Zip:	∃	Address:	□ SAN	► □ LAND USE	UESTED-H	TYPE OF PERMIT REQUESTED—  Owner's Name:
	1		1	The second secon	CONTRACTOR OF CONTRACTOR DESCRIPTIONS OF CONTRACTOR OF CON		7	7. Commonweal	Colores to commercial and a second se

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection. Owner(s): hers listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application) 11-6

Authorized Agent:

Address to send permit

2105

7

HARMONY

TOWNHALL

B

Deed

Date

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

JANESUILE, I 100 53546 Attach

Copy of Tax Statement

ased the property send your Recorded Deed